

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM **460**

Page 1 of 181

For Official Use Only

Statement covers period

from 09/23/2018

through 10/20/2018

Date of election if applicable:
(Month, Day, Year)

11/06/2018

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="radio"/> State Candidate Election Committee
<input type="radio"/> Recall
(Also Complete Part 5.) | <input checked="" type="checkbox"/> Ballot Measure Committee
<input checked="" type="radio"/> Primary Formed
<input type="radio"/> Controlled
<input checked="" type="radio"/> Sponsored
(Also Complete Part 6.) |
| <input type="checkbox"/> General Purpose Committee
<input type="radio"/> Sponsored
<input type="radio"/> Small Contributor Committee
<input type="radio"/> Political Party/Central Committee | <input type="checkbox"/> Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.) |

2. Type of Statement:

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Pre-election Statement
<input type="checkbox"/> Semi-annual Statement
<input type="checkbox"/> Termination Statement
<input checked="" type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement
<input type="checkbox"/> Special Odd-Year Report
<input type="checkbox"/> Supplemental Preelection
Statement - Attach Form 495 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Amended to reflect transactions inadvertently omitted from Schedules A, C and F.

3. Committee Information

I.D. NUMBER
1399958

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by
AIDS Healthcare Foundation and ACCE Action

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90024	(310) 576-1233

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX/E-MAIL ADDRESS

(310) 319-0156 / bpalmer@strumwooch.com

Treasurer(s)

NAME OF TREASURER
Beverly Grossman Palmer

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90024	(310) 576-1233

NAME OF ASSISTANT TREASURER, IF ANY
Fredric Woocher

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90024	(310) 576-1233

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on <u>01/31/2019</u> DATE	By <u>Beverly Grossman Palmer</u> SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on <u>01/31/2019</u> DATE	By <u>Michael Weinstein</u> SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR
Executed on <u>01/31/2019</u> DATE	By <u>Christina Livingston</u> SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
Executed on <u>01/31/2019</u> DATE	By <u>Elena Popp</u> SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D.NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D.NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

Expands Local Governments' Authority to Enact Rent Control on Residential Property. Initiative Statute.

BALLOT NO. OR LETTER

JURISDICTION

10

Statewide

☒ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Michael Weinstein

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

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FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Christina Livingston

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Recipient Committee
Campaign Statement
Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION ☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Elena Popp

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD ☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD ☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD ☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD ☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 5 of 181 I.D. NUMBER 1399958
------------------------------------------------------------------	--------------------------------------------------------------------

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$10,312,043.00	\$23,047,248.25
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$10,312,043.00	\$23,047,248.25
4. Nonmonetary Contributions	Schedule C, Line 3	\$973,474.84	\$1,619,916.02
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$11,285,517.84	\$24,667,164.27

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$8,045,780.19	\$19,319,381.20
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$8,045,780.19	\$19,319,381.20
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	(\$1,128,477.95)	\$113,910.36
10. Nonmonetary Adjustment	Schedule C, Line 3	\$973,474.84	\$1,619,916.02
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$7,890,777.08	\$21,053,207.58

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$1,636,614.24	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$10,312,043.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$8,045,780.19	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$3,902,877.05	
If this is a termination statement, Line 16 must be zero.			
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$0.00	

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$113,910.36

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through	10/20/2018	Page 6 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/23/2018	Sally Kirk San Rafael, CA 94903	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	None None	\$10.00	\$10.00	2018G: \$10.00
9/23/2018	Judith MacLean Berkeley, CA 94704	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	San Francisco Baykeeper Staff Writer	\$50.00	\$50.00	2018G: \$50.00
9/23/2018	Nathaniel Reti Los Angeles, CA 90028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Native Instruments North America, Inc. Supply Chain Specialist	\$20.00	\$20.00	2018G: \$20.00
9/24/2018	Andrea Gersh Los Angeles, CA 90019	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Cedars Sinai Nurse	\$50.00	\$50.00	2018G: \$50.00
9/24/2018	Eliana Greenberg Oakland, CA 94618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kaiser Permanente Health Care Consultant	\$35.00	\$70.00	2018G: \$70.00

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more.

(Include all Schedule A subtotals.) \$10,312,043.00

2. Amount received this period - unitemized contributions of less than \$100

\$0.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL** \$10,312,043.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through	10/20/2018	Page 7 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/24/2018	Laura Lent El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$100.00	\$100.00	2018G: \$100.00
9/24/2018	Aleksandr Nisnevich Berkeley, CA 94709	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Microsoft Software Engineer	\$25.00	\$150.00	2018G: \$150.00
9/24/2018	Kathleen Reilley Oceanside, CA 92056	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$100.00	2018G: \$100.00
9/24/2018	Jeanne Rosenmeier San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Tax Preparer	\$170.00	\$680.00	2018G: \$680.00
9/24/2018	Michael Tarbet Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Attorney	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through	10/20/2018	Page 8 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/25/2018	Avery Ecklein Methuen, MA 01844	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$5.00	\$5.00	2018G: \$5.00
9/25/2018	Sharonda Moss Long Beach, CA 90813	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Long Beach CA Student	\$3.00	\$6.00	2018G: \$6.00
9/25/2018	Brian Springfield San Francisco, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Graphic Designer	\$3.00	\$3.00	2018G: \$3.00
9/26/2018	Joseph Bates Studio City, CA 91604	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CBS Television Producer/IT	\$50.00	\$50.00	2018G: \$50.00
9/26/2018	Andrew Cab Santa Monica, CA 90405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$25.00	\$25.00	2018G: \$25.00
SUBTOTAL						

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/26/2018	California Nurses Association Initiative PAC Sacramento, CA 95814-4602 Committee ID: 941597	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$300,000.00	\$300,000.00	2018G: \$300,000.00
9/26/2018	Drew Geller San Pablo, CA 94806	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sound Physicians Hospitalist	\$500.00	\$500.00	2018G: \$500.00
9/26/2018	Felecia Johnson Spring Valley, CA 91977	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$5.00	\$5.00	2018G: \$5.00
9/26/2018	Shirley Monson Encino, CA 91436-3705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Shirley Monson Attorney	\$50.00	\$50.00	2018G: \$50.00
9/27/2018	Cristian Bernal Manteca, CA 95336	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Diamond Pet Foods Quality Control	\$3.00	\$3.00	2018G: \$3.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/27/2018	Bryan Gambogi San Francisco, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
9/27/2018	Jeff May San Francisco, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Rally Health Senior Software Engineer	\$500.00	\$600.00	2018G: \$600.00
9/28/2018	Jennifer Brown Albany, CA 94706	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kaiser Permanente Help Desk Support	\$50.00	\$190.00	2018G: \$190.00
9/28/2018	Alex Fernie Los Angeles, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Upright Citizens Brigade Teacher	\$25.00	\$25.00	2018G: \$25.00
9/28/2018	Julia Gureck Los Angeles, CA 90006	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bet Tzedek Legal Services Pro Bono and Volunteer Coordinator	\$50.00	\$50.00	2018G: \$50.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/28/2018	Lisa Rubio San Rafael, CA 94903	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
9/28/2018	Katie Simpson San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DocuSign Copywriter	\$10.00	\$60.00	2018G: \$60.00
9/28/2018	Ladd Sullivan Los Angeles, CA 90005-3725	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Atkinson, Andelson Paralegal	\$40.00	\$150.00	2018G: \$150.00
9/28/2018	Marvin Vargas Los Angeles, CA 90029	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of LA Museum Guide	\$100.00	\$200.00	2018G: \$200.00
9/29/2018	Ebby Bakhtiar Santa Monica, CA 90402	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Attorney	\$250.00	\$250.00	2018G: \$250.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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Amounts may be rounded
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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9/30/2018	Robert Berens Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Freelance Writer	\$100.00	\$200.00	2018G: \$200.00
9/30/2018	David Bravo Los Angeles, CA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RST Property Mgmt	\$25.00	\$25.00	2018G: \$25.00
9/30/2018	Gloria Bruce Oakland, CA 94609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	East Bay Housing Organizations Executive Director	\$25.00	\$25.00	2018G: \$25.00
9/30/2018	L.E. Correia Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self TV Writer	\$33.00	\$199.00	2018G: \$199.00
9/30/2018	Brennan McBride San Francisco, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bio-Rad Lab's, Inc. Software Engineer	\$50.00	\$50.00	2018G: \$50.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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9/30/2018	Patrice Scatena San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Attorney	\$75.00	\$75.00	2018G: \$75.00
10/1/2018	Aleksandr Nisnevich Berkeley, CA 94709	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Microsoft Software Engineer	\$25.00	\$150.00	2018G: \$150.00
10/1/2018	Jeanne Rosenmeier San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Tax Preparer	\$170.00	\$680.00	2018G: \$680.00
10/1/2018	Michael Spector Pacific Palisades, CA 90272	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$25.00	\$25.00	2018G: \$25.00
10/1/2018	Dilia Villasenor Los Angeles, CA 90004	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kaiser Nurse	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/2/2018	Jessica Bowker San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IFPTE Communications Specialist	\$25.00	\$25.00	2018G: \$25.00
10/2/2018	Alison Brennan Sacramento, CA 95831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$500.00	\$500.00	2018G: \$500.00
10/2/2018	Peter Foreman Long Beach, CA 90808	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$9.00	2018G: \$9.00
10/2/2018	James Gonzales Los Angeles, CA 90023	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BJs Restaurant Waiter	\$3.00	\$3.00	2018G: \$3.00
10/2/2018	Linh Le Redwood City, CA 94063-1888	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hearsay Systems Customer Education Manager	\$10.00	\$30.00	2018G: \$20.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/2/2018	Shelley Logan Lake Forest, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Progressive Community Management Accounts Receivable	\$25.00	\$35.00	2018G: \$35.00
10/2/2018	Michael Ryback Long Beach, CA 90804	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$9.00	2018G: \$9.00
10/2/2018	Alvaro Vega Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	Kamran Ghassemieh Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Fred Ghassemieh Investments	\$5.00	\$8.00	2018G: \$8.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/3/2018	Michael Gonos San Francisco, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NexonM QA Engineer	\$25.00	\$25.00	2018G: \$25.00
10/3/2018	David Ruder Brooklyn, NY 11238	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Make Music Alliance Arts Administrator	\$50.00	\$50.00	2018G: \$50.00
10/3/2018	Arielle Sallai Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Coalition for Affordable Housing Consultant	\$5.00	\$15.00	2018G: \$15.00
10/3/2018	John Shea Berkeley, CA 94710-2742	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$200.00	\$200.00	2018G: \$200.00
10/3/2018	Russell Walker Sunnyvale, CA 94086	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LookingGlass Cyber Solutions Software Engineer	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

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10/4/2018	Elizabeth Ackerman Los Angeles, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Voice Coach	\$10.00	\$10.00	2018G: \$10.00
10/4/2018	Robert Coplin Sacramento, CA 95811	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
10/4/2018	Anne Haneline Paso Robles, CA 93446	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$50.00	2018G: \$50.00
10/4/2018	Marianne Houle Lajolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
10/4/2018	Robert Jackson Long Beach, CA 90813	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	WinCorp Solutions IT Technician	\$25.00	\$25.00	2018G: \$25.00
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

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10/4/2018	Yoshino Jasso Long Beach, CA 90802	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Retail	\$25.00	\$25.00	2018G: \$25.00
10/4/2018	Andrea Lacasia Palo Alto, CA 94306	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Agios Pharmacist	\$10.00	\$110.00	2018G: \$110.00
10/4/2018	Sharonda Moss Long Beach, CA 90813	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Long Beach CA Student	\$3.00	\$6.00	2018G: \$6.00
10/4/2018	Thomas Nelson Burbank, CA 91505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Td Sales Rep	\$10.00	\$10.00	2018G: \$10.00
10/4/2018	Tes Welborn San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$100.00	\$300.00	2018G: \$300.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/5/2018	Raul Aragon Long Beach, CA 90802	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dockmasters Bookkeeping	\$5.00	\$5.00	2018G: \$5.00
10/5/2018	Crispino Brion West Hollywood, CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
10/5/2018	Justin Garcia Sacramento, CA 95816	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	State of California Scientist	\$25.00	\$25.00	2018G: \$25.00
10/5/2018	John Noble San Francisco, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lifelong Dental Care Dentist	\$100.00	\$100.00	2018G: \$100.00
10/5/2018	Katie Simpson San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DocuSign Copywriter	\$10.00	\$60.00	2018G: \$60.00
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10/5/2018	Sabrina Venskus Los Angeles, CA 90017	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Venskus & Associates, APC Lawyer	\$100.00	\$350.00	2018G: \$350.00
10/5/2018	Niels Verosky San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Writer	\$50.00	\$50.00	2018G: \$50.00
10/6/2018	Marla Knight San Francisco, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$50.00	2018G: \$50.00
10/6/2018	Haley Kovacs Menlo Park, CA 94025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Google Preschool teacher	\$25.00	\$25.00	2018G: \$25.00
10/6/2018	Rosalie Macrae San Marcos, CA 92069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Self employed	\$1.00	\$1.00	2018G: \$1.00
SUBTOTAL						

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10/6/2018	Ramona Monteros North Hollywood, CA 91601	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
10/6/2018	Anita Robinson Lancaster, CA 93534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$5.00	\$5.00	2018G: \$5.00
10/6/2018	Daniel Szymanowski San Diego, CA 92104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Illumina, Inc. Web Designer	\$10.00	\$30.00	2018G: \$30.00
10/6/2018	Dylan Winn San Marcos, CA 92069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	First Data Software Developer	\$10.00	\$10.00	2018G: \$10.00
10/7/2018	L.E. Correia Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self TV Writer	\$33.00	\$199.00	2018G: \$199.00
SUBTOTAL						

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NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/7/2018	Stephen Fischer Los Angeles, CA 90042	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	\$100.00	\$100.00	2018G: \$100.00
10/7/2018	John Hart San Francisco, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	State of California Supervisor	\$10.00	\$10.00	2018G: \$10.00
10/7/2018	Gregory Sykes San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Univ. of CA Ofc. of the President Data Analyst	\$50.00	\$50.00	2018G: \$50.00
10/7/2018	Jesse Thorn Los Angeles, CA 90065	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Author	\$100.00	\$100.00	2018G: \$100.00
10/8/2018	Javier Benites Los Angeles, CA 90005	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self CPA	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

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(other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

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Amounts may be rounded
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/8/2018	Robert Berens Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Freelance Writer	\$100.00	\$200.00	2018G: \$200.00
10/8/2018	Michael Hynes Northridge, CA 91325	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Television Production Designer	\$5.00	\$10.00	2018G: \$10.00
10/8/2018	Andrea Lacasia Palo Alto, CA 94306	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Agios Pharmacist	\$100.00	\$110.00	2018G: \$110.00
10/8/2018	Aleksandr Nisnevich Berkeley, CA 94709	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Microsoft Software Engineer	\$25.00	\$150.00	2018G: \$150.00
10/8/2018	Jeanne Rosenmeier San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Tax Preparer	\$170.00	\$680.00	2018G: \$680.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/8/2018	Michael Ryback Long Beach, CA 90804	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$9.00	2018G: \$9.00
10/8/2018	Steve Schnaar Santa Cruz, CA 95060	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	The Bike Church/Santa Cruz County Office of Education Bike mechanic/Teacher	\$100.00	\$100.00	2018G: \$100.00
10/8/2018	Joel Ventresca San Francisco, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City and County of San Francisco Airport Commission Airport Finance Analyst	\$250.00	\$250.00	2018G: \$250.00
10/8/2018	Richard Vestal Spring Valley, CA 91977	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Costco Wholesale Clerk	\$5.00	\$5.00	2018G: \$5.00
10/9/2018	Maryanne Dieffenbach Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/9/2018	Peter Foreman Long Beach, CA 90808	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$9.00	2018G: \$9.00
10/9/2018	Mike Foster Long Beach, CA 90804	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Forward Financing Software Engineer	\$10.00	\$10.00	2018G: \$10.00
10/9/2018	Michael Kratz Escondido, CA 92033	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Vista Engineer	\$50.00	\$50.00	2018G: \$50.00
10/9/2018	Steve Schatz Lakewood, CA 90715	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Los Angeles Unified School District Teacher	\$5.00	\$15.00	2018G: \$15.00
10/9/2018	Diamond Tokuda Boston, MA 02130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partners in Health Supply Chain Analyst	\$5.00	\$5.00	2018G: \$5.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/9/2018	***RETURNED*** Regina Williams Dublin, CA 94568	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	(\$50.00)	\$0.00	2018G: \$0.00
10/9/2018	Regina Williams Dublin, CA 94568	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$0.00	2018G: \$0.00
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	Len Beyea Santa Cruz, CA 95062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Consultant	\$20.00	\$20.00	2018G: \$20.00
10/10/2018	Salvador Bustamante San Jose, CA 95125	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

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SCHEDULE A (CONT.)

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10/10/2018	Rueben Caldwell Los Angeles, CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Los Angeles Urban Planner	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	Angel Castillo Los Angeles, CA 90012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Deluxe Media Inc. Subtitling Coordinator	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	James Cregut San Diego, CA 92116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Plumber	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	Merle Daly Pollock Pines, CA 95726	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$50.00	2018G: \$50.00
10/10/2018	Richard Girling San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
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10/10/2018	Michael Kihnley Cupertino, CA 95017	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Nordstrom Salesperson	\$25.00	\$25.00	2018G: \$25.00
10/10/2018	Nathan Kim Los Angeles, CA 90031	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Filmmaker	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	Jay Koslofsky Berkeley, CA 94702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Attorney	\$50.00	\$50.00	2018G: \$50.00
10/10/2018	Shelley Logan Lake Forest, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Progressive Community Management Accounts Receivable	\$10.00	\$35.00	2018G: \$35.00
10/10/2018	Zak Long San Francisco, CA 94109-5140	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	University of California Video Producer	\$27.00	\$81.00	2018G: \$81.00
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SCHEDULE A (CONT.)

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10/10/2018	Andrea Press Valley Village, CA 91607	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Performer	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	Marta Segura Los Angeles, CA 90043	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Gold & Associates Self employed	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	Gregory Sroka North Hollywood, CA 91601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Prometheus Entertainment Story Associate Producer	\$3.00	\$3.00	2018G: \$3.00
10/10/2018	Jennifer Willis San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housing Rights Committee of San Francisco Tenant Advocate	\$10.00	\$10.00	2018G: \$10.00
10/10/2018	Myron Wollin Long Beach, CA 90808	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	None Not employed	\$25.00	\$25.00	2018G: \$25.00
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SCHEDULE A (CONT.)

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10/11/2018	David Blake Berkeley, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Book Editor	\$500.00	\$500.00	2018G: \$500.00
10/11/2018	Renee Cronenwalt Los Angeles, CA 90024	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$50.00	2018G: \$50.00
10/11/2018	Michael Fanning San Francisco, CA 94107	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pacific Life Business Analyst	\$20.00	\$20.00	2018G: \$20.00
10/11/2018	Roselle Gozali San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SFUSD Sub teacher	\$10.00	\$45.00	2018G: \$45.00
10/11/2018	Ashley Lauth Oakland, CA 94606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Ctr4BioDiv Organizer	\$75.00	\$75.00	2018G: \$75.00
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10/11/2018	Persia Matine Mill Valley, CA 94941	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Make-up Artist	\$10.00	\$10.00	2018G: \$10.00
10/11/2018	Rodrigo Vazquez Los Angeles, CA 90036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Fox Networks Attorney	\$25.00	\$125.00	2018G: \$125.00
10/12/2018	Luke Giordano Los Angeles, CA 90026-3531	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Warner Bros Animation Writer	\$50.00	\$50.00	2018G: \$50.00
10/12/2018	Michael Hynes Northridge, CA 91325	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Television Production Designer	\$5.00	\$10.00	2018G: \$10.00
10/12/2018	John Malpede Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Los Angeles Poverty Department Theater Director	\$25.00	\$25.00	2018G: \$25.00
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10/12/2018	Katie Simpson San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DocuSign Copywriter	\$10.00	\$60.00	2018G: \$60.00
10/13/2018	Kamran Ghassemieh Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Fred Ghassemieh Investments	\$3.00	\$8.00	2018G: \$8.00
10/13/2018	Leone Hankey Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Cal State University Teaching	\$100.00	\$100.00	2018G: \$100.00
10/13/2018	Robert Star Alameda, CA 94501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$100.00	\$100.00	2018G: \$100.00
10/13/2018	Daniel Szymanowski San Diego, CA 92104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Illumina, Inc. Web Designer	\$10.00	\$30.00	2018G: \$30.00
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through	10/20/2018	Page 33 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/14/2018	Heather Burns San Jose, CA 95126	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Union School District Teacher	\$10.00	\$10.00	2018G: \$10.00
10/14/2018	L.E. Correia Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self TV Writer	\$33.00	\$199.00	2018G: \$199.00
10/14/2018	Hannah Howard Los Angeles, CA 90019	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Computer Programmer	\$250.00	\$250.00	2018G: \$250.00
10/14/2018	David Seitz Los Angeles, CA 90005	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Harvey Mudd College Assistant Professor	\$50.00	\$150.00	2018G: \$150.00
10/14/2018	Rhonda Weber Hercules, CA 94547	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CA Dept of Transportation Transportation Engineer - Civil	\$10.00	\$10.00	2018G: \$10.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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10/15/2018	Jennifer Brown Albany, CA 94706	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kaiser Permanente Help Desk Support	\$50.00	\$190.00	2018G: \$190.00
10/15/2018	Edward Foley Covina, CA 91724	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Alhambra Unified School Dist. Heavy Equipt. Foreman	\$100.00	\$100.00	2018G: \$100.00
10/15/2018	Jay Kelekian Berkeley, CA 94705-2209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of Berkeley Municipal Employee	\$1,000.00	\$1,000.00	2018G: \$1,000.00
10/15/2018	Josh Kelly San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	West Customer Support	\$25.00	\$25.00	2018G: \$25.00
10/15/2018	Cornelius Moore San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	California Newsreel Film Distributor	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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10/15/2018	Aleksandr Nisnevich Berkeley, CA 94709	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Microsoft Software Engineer	\$25.00	\$150.00	2018G: \$150.00
10/15/2018	Jeanne Rosenmeier San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Tax Preparer	\$170.00	\$680.00	2018G: \$680.00
10/15/2018	Ernest Simmons San Francisco, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Symantec Tech Trainer	\$25.00	\$25.00	2018G: \$25.00
10/15/2018	Ladd Sullivan Los Angeles, CA 90005-3725	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Atkinson, Andelson Paralegal	\$40.00	\$150.00	2018G: \$150.00
10/15/2018	Sam Underwood Mountain View, CA 94041	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Clean Harbors Program Manager	\$20.00	\$20.00	2018G: \$20.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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I.D. Number
1399958

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/15/2018	Tes Welborn San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$200.00	\$300.00	2018G: \$300.00
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	Leslie Firestone Berkeley, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$50.00	2018G: \$50.00
10/16/2018	Peter Foreman Long Beach, CA 90808	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$9.00	2018G: \$9.00
10/16/2018	David Martin Pittsburg, CA 94565	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$10.00	\$10.00	2018G: \$10.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/16/2018	Robert Nelson Port Hueneme, CA 93041	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Arjays Sales	\$10.00	\$10.00	2018G: \$10.00
10/16/2018	Mark Osborne Huntington Beach, CA 92649	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$50.00	\$50.00	2018G: \$50.00
10/16/2018	Joel Perlstein San Francisco, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$30.00	\$33.00	2018G: \$33.00
10/16/2018	Joel Perlstein San Francisco, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$33.00	2018G: \$33.00
10/16/2018	Steve Schatz Lakewood, CA 90715	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Los Angeles Unified School District Teacher	\$10.00	\$15.00	2018G: \$15.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

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10/16/2018	Pastor William D. Smart, Jr. Los Angeles, CA 90035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SCLC President	\$25.00	\$25.00	2018G: \$25.00
10/17/2018	Josephine Alioto Oakland, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Leda Law Lawyer	\$50.00	\$50.00	2018G: \$50.00
10/17/2018	Martin Eichner Palo Alto, CA 94306-3306	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$250.00	\$250.00	2018G: \$250.00
10/17/2018	Elena Mancia Los Angeles, CA 90004	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Cleaning	\$10.00	\$10.00	2018G: \$10.00
10/17/2018	Georgy Vladimirov Palo Alto, CA 94303	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vertisystem Computer Programmer	\$100.00	\$100.00	2018G: \$100.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/18/2018	Susannah Brouwer San Francisco, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Center for Care Innovations Non-Profit Operations Director	\$50.00	\$50.00	2018G: \$50.00
10/18/2018	Steven Hagerty El Cerrito, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SFEI Analyst	\$10.00	\$10.00	2018G: \$10.00
10/18/2018	Leah Hess Oakland, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Attorney	\$500.00	\$500.00	2018G: \$500.00
10/18/2018	Reggie Melonson Culver City, CA 90230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Loyola Marymount University Library Assistant	\$10.00	\$10.00	2018G: \$10.00
10/18/2018	Nicholas Schutz North Hollywood, CA 91601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	College of the Canyons Library Media Technician	\$10.00	\$10.00	2018G: \$10.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/19/2018	Thomas F Cardellino San Francisco, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$8.00	\$8.00	2018G: \$8.00
10/19/2018	Katy Lim Oakland, CA 94606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Public Relations Director	\$250.00	\$250.00	2018G: \$250.00
10/19/2018	Mickey Madden Los Feliz, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Musician	\$500.00	\$500.00	2018G: \$500.00
10/19/2018	David Moore Santa Barbara, CA 93117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	New Covenant Church Minister	\$3.00	\$3.00	2018G: \$3.00
10/19/2018	Michael Ryback Long Beach, CA 90804	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	\$3.00	\$9.00	2018G: \$9.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/19/2018	Katie Simpson San Francisco, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DocuSign Copywriter	\$10.00	\$60.00	2018G: \$60.00
10/19/2018	Sabrina Venskus Los Angeles, CA 90017	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Venskus & Associates, APC Lawyer	\$250.00	\$350.00	2018G: \$350.00
10/20/2018	Daniel Boyarin Berkeley, CA 94720	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	UC Berkeley Professor	\$18.00	\$18.00	2018G: \$18.00
10/20/2018	Roselle Gozali San Francisco, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SFUSD Sub teacher	\$10.00	\$45.00	2018G: \$45.00
10/20/2018	Jae Eun Kwak Glendale, CA 91204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Onward Search Proofreader	\$10.00	\$10.00	2018G: \$10.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through	10/20/2018	Page 42 of 181

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10/20/2018	Claudia Leung Oakland, CA 94606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	San Francisco Arts Commission Program Associate	\$500.00	\$500.00	2018G: \$500.00
10/20/2018	Curtis Lum	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sylvan Learning Teacher	\$10.00	\$10.00	2018G: \$10.00
10/20/2018	Daniel Szymanowski San Diego, CA 92104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Illumina, Inc. Web Designer	\$10.00	\$30.00	2018G: \$30.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL				\$10,312,043.00		

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Schedule B – Part 1 Loans Received

Type or print in ink.
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SCHEDULE B - PART 1

Statement covers period
from 09/23/2018
through 10/20/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER

1399958

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN				CALENDAR YEAR PER ELECTION**
					DATE DUE	RATE % RATE	DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN				CALENDAR YEAR PER ELECTION**
					DATE DUE	RATE % RATE	DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN				CALENDAR YEAR PER ELECTION**
					DATE DUE	RATE % RATE	DATE INCURRED	

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____

(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____

(Total Column (c) plus loans under \$100 paid or forgiven.)

(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____

Enter the net here and on the Summary Page, Column A, Line 2.

(may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2
Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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I.D. Number 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action	
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FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/25/2018	East Bay Democratic Socialists of America Oakland, CA 94609 Memo Reference: NON1055	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Leave behinds for canvassing	\$515.15	\$1,379.32	2018G: \$1,379.32
9/25/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1066 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Ad words	\$500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/26/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1067 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Ad words	\$8,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1068 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Ad words	\$2,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$973,474.84

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....

\$973,474.84

2. Amount received this period - unitemized nonmonetary contributions of less than \$100

\$0.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

\$973,474.84

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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I.D. Number 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1112 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Ad words	\$7,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1127 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Billboard	\$4,118.22	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1128 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Billboard	\$19,148.79	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/26/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1129 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Production of ad	\$5,150.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/28/2018	East Bay Working Families, A Coalition of Unions and Community Groups Richmond, CA 94801 Memo Reference: NON1133 Committee ID: 1390351	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Field work	\$17,991.10	\$154,927.67	2018G: \$154,927.67
9/28/2018	East Bay Working Families, A Coalition of Unions and Community Groups Richmond, CA 94801 Memo Reference: NON1134 Committee ID: 1390351	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Phone banking & Field Work	\$44,000.00	\$154,927.67	2018G: \$154,927.67
9/28/2018	East Bay Working Families, A Coalition of Unions and Community Groups Richmond, CA 94801 Memo Reference: NON1135 Committee ID: 1390351	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Doorhanger	\$263.63	\$154,927.67	2018G: \$154,927.67
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1144 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Google ads	\$6,747.16	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

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to whole dollars.

SCHEDULE C

Statement covers period
from 09/23/2018
through 10/20/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

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9/30/2018	Housing California Sacramento, CA 95814 Memo Reference: NON1145	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Staff time	\$133.32	\$636.06	2018G: \$636.06
10/2/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1158 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Google ads	\$6,622.96	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1165 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Google ads	\$6,363.38	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	California Democratic Party Sacramento, CA 95811 Memo Reference: NON1216 Committee ID: 741666	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Mail production and postage	\$13,608.78	\$15,509.26	2018G: \$15,509.26

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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I.D. Number
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10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1218 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Google ads	\$7,787.08	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1226 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Facebook ads	\$2,850.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1244 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Google ads	\$8,274.30	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/6/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1245 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Google ads	\$7,355.21	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period

from 09/23/2018

through 10/20/2018

CALIFORNIA
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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10/7/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1246 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$7,340.60	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/7/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1247 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Twitter ads	\$1,494.81	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1248 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$4,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/6/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1249 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$6,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.

(Include all Schedule C subtotals.).....

2. Amount received this period - unitemized nonmonetary contributions of less than \$100

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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10/7/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1250 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$5,250.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	California Democratic Party Sacramento, CA 95811 Memo Reference: NON1251 Committee ID: 741666	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Graphics/printing	\$628.09	\$15,509.26	2018G: \$15,509.26
10/8/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1278 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$6,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/8/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1279 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$7,937.67	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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I.D. Number 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/20/2018	Californians for Justice Educational Fund, Inc. San Jose, CA 95133 Memo Reference: NON1280	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Anticipated staff time	\$441.00	\$441.00	2018G: \$441.00
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1289	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Facebook ads	\$6,930.01	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1290	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Google ads	\$9,345.60	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1324	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Google ads	\$8,907.89	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 53 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1325 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$7,061.29	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	California Democratic Party Sacramento, CA 95811 Memo Reference: NON1326 Committee ID: 741666	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Printing	\$12.75	\$15,509.26	2018G: \$15,509.26
10/12/2018	IFPTE Local 21 Issues PAC Fund San Francisco, CA 94103 Memo Reference: NON1360 Committee ID: 1362080	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>			\$5,000.00	\$5,000.00	2018G: \$5,000.00
10/13/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1396 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$17,400.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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I.D. Number 1399958	

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NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/14/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1397 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$32,374.01	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/14/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1398 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Twitter ads	\$1,011.71	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/15/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1405 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Billboard advertising	\$3,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	California Democratic Party Sacramento, CA 95811 Memo Reference: NON1406 Committee ID: 741666	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Shipping	\$203.84	\$15,509.26	2018G: \$15,509.26

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Schedule C

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 55 of 181 I.D. Number 1399958
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NAME OF FILER

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10/15/2018	California Democratic Party Sacramento, CA 95811 Memo Reference: NON1407 Committee ID: 741666	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Printing/shipping	\$491.48	\$15,509.26	2018G: \$15,509.26
10/15/2018	California Democratic Party Sacramento, CA 95811 Memo Reference: NON1413 Committee ID: 741666	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Printing	\$80.51	\$15,509.26	2018G: \$15,509.26
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1422 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Facebook ads	\$6,150.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1423 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div><div></div>OTH</div><div><div></div>PTY</div><div><div></div>SCC</div></div>		Google spend	\$26,902.53	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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Schedule C

Nonmonetary Contributions Received

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 56 of 181
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I.D. Number
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10/15/2018	Housing California Sacramento, CA 95814 Memo Reference: NON1424	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Staff time	\$33.33	\$636.06	2018G: \$636.06
10/15/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1426	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Google ads	\$23,244.06	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/15/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1427	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Facebook ads	\$6,177.79	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	East Bay Working Families, A Coalition of Unions and Community Groups Richmond, CA 94801 Memo Reference: NON1436	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Field work	\$6,600.00	\$154,927.67	2018G: \$154,927.67

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Schedule C

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1437 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$26,995.87	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1438 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$4,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1447 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$3,750.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1448 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$7,479.14	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 58 of 181 I.D. Number 1399958
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10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1471 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$13,028.44	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1472 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Google ads	\$14,040.54	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1474 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$3,750.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1475 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Facebook ads	\$4,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
	Page 59 of 181

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NAME OF FILER

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9/30/2018	East Bay Democratic Socialists of America Oakland, CA 94609 Memo Reference: NON1499	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Phone banking	\$250.00	\$1,379.32	2018G: \$1,379.32
10/10/2018	East Bay Democratic Socialists of America Oakland, CA 94609 Memo Reference: NON1500	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Voter File	\$15.00	\$1,379.32	2018G: \$1,379.32
10/13/2018	East Bay Democratic Socialists of America Oakland, CA 94609 Memo Reference: NON1501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		CRM	\$20.00	\$1,379.32	2018G: \$1,379.32
9/23/2018	SEIU United Service Workers West Independent Expenditure Committee for People-Powered Politics Los Angeles, CA 90015 Memo Reference: NON1529 Committee ID: 1405290	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Travel Expenses	\$130.00	\$130.00	2018G: \$130.00

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
	Page 60 of 181

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10/18/2018	SEIU Local 1021 Independent Expenditures PAC Oakland, CA 94609 Memo Reference: NON1530 Committee ID: 1296949	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Voter Outreach	\$80.88	\$91.91	2018G: \$91.91
10/19/2018	SEIU Local 1021 Independent Expenditures PAC Oakland, CA 94609 Memo Reference: NON1531 Committee ID: 1296949	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Voter Outreach	\$11.03	\$91.91	2018G: \$91.91
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1532 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Staff time	\$53,245.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	ACLU Foundation of San Diego & Imperial Counties San Diego, CA 92103 Memo Reference: NON1687 Committee ID: 1344477	<div><div></div><div>IND</div><div><div></div>COM</div><div>OTH</div><div>PTY</div><div>SCC</div></div>		Field Work (Estimate)	\$50,900.00	\$50,900.00	2018G: \$50,900.00

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 61 of 181
------------------------------------------------------------------	----------------------------------------------

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NAME OF FILER

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9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1710 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$150.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1711 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$62.77	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1712 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Drinks	\$6.15	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1713 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Supplies for event	\$144.17	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
	Page 62 of 181
I.D. Number 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1714 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Drink	\$4.05	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1715 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Meal	\$11.88	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1716 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Fuel	\$126.26	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1717 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Supply for Bus	\$12.92	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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(other than PTY or SCC)
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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 63 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1718 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$150.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/28/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1719 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Tolls	\$11.95	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1720 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$29.04	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1721 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Drink	\$1.99	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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I.D. Number 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1722 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$200.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1723 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$41.95	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1724 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$9.80	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1725 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$32.22	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 65 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1726 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Toll	\$5.40	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/2/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1727 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Supplies for Bus	\$87.38	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1728 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Drink	\$2.75	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1729 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$11.68	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
2. Amount received this period - unitemized nonmonetary contributions of less than \$100
3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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OTH - Other
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SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 66 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1730 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$4.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1731 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$4.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1732 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$4.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1733 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$4.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
	Page 67 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/2/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1734 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$17.21	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1735 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Car rental	\$141.17	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/3/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1736 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$10.07	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1737 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$4.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
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(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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OTH - Other
PTY - Political Party
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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 68 of 181
------------------------------------------------------------------	----------------------------------------------

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1738 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking for Bus	\$4.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1739 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$188.66	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1740 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$6.50	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/6/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1741 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Drink Machine no receipt	\$2.20	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
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PTY - Political Party
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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period

from 09/23/2018

through 10/20/2018

CALIFORNIA
FORM **460**

Page 69 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/6/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1742 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Chips Machine no receipt	\$2.48	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/6/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1743 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$145.56	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1744 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$95.92	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1745 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$30.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.

(Include all Schedule C subtotals.).....

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3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 70 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1746 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Drink	\$2.50	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1747 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Hotel	\$1,095.51	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/6/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1748 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Event in Dallas	\$720.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/7/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1749 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Fuel	\$168.85	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 71 of 181 I.D. Number 1399958
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/7/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1750 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Water for Mobolizers	\$17.74	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1751 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$34.17	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1752 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Bus wash	\$80.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/8/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1753 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Hotel	\$225.08	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 72 of 181 I.D. Number 1399958
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1754 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$96.11	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1755 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Coffee	\$5.78	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1756 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel for bus	\$44.39	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1757 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$20.65	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/9/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1758 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$113.15	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/11/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1759 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$6.44	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/11/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1760 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Drink	\$2.39	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/11/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1761 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$84.37	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period
from 09/23/2018
through 10/20/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/11/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1762 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Drink	\$1.99	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1763 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Hotel	\$123.01	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1764 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$17.38	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1765 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$110.97	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period
from 09/23/2018
through 10/20/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1766 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Meal	\$5.34	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/10/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1767 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Hotel	\$299.14	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/13/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1768 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Meal	\$46.05	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/12/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1769 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Meal	\$6.34	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 76 of 181 I.D. Number 1399958
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/12/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1770 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Fuel	\$155.23	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/14/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1771 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Drink	\$3.15	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/11/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1772 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Parking for Bus	\$53.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/14/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1773 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Fuel for bus	\$37.76	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/14/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1774 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Hotel	\$411.62	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1775 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$103.41	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1776 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$32.97	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1777 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$52.75	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
2. Amount received this period - unitemized nonmonetary contributions of less than \$100
3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 78 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1778 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$6.92	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1779 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$11.58	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1780 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$113.98	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1781 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$12.30	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 79 of 181
------------------------------------------------------------------	----------------------------------------------

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1782 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Cleaning supplies for bus	\$32.06	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1783 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$47.71	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1784 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Hotel	\$329.48	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1785 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Bus wash	\$70.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE C

Statement covers period

from 09/23/2018

through 10/20/2018

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FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1786 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Rental	\$79.63	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1787 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Copies of flyer for yes on 10 per Jackies	\$382.23	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1788 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$8.97	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1789 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Fuel	\$121.01	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

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(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1790 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Drink	\$1.95	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1791 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Fuel	\$161.09	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1792 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Safety vest and Coolant for bus	\$81.21	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1794 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Parking	\$0.25	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

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10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1795 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Parking	\$4.27	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1796 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal for Staff	\$27.09	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1797 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal for Staff	\$8.58	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1798 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Batteries for Bullhorns	\$8.94	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1799 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Batteries for Bullhorns	\$8.94	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1800 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Dues for IFTA	\$67.21	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1802 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Coffee	\$4.29	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1803 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Coffee for church event	\$19.70	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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Schedule C

Nonmonetary Contributions Received

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
	Page 84 of 181
I.D. Number 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1804 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Hotel	\$820.73	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1805 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal	\$23.60	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/29/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1866 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Mobilizer gift cards for Prop 10 events	\$375.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/29/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1867 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Mob	\$375.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/29/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1868 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Mobilizer gift cards for Prop 10 events	\$375.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/29/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1869 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Mobilizer gift cards for Prop 10 events	\$375.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/28/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1870 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Amtrav fee	\$7.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/28/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1871 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Amtrav fee	\$7.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action	I.D. Number 1399958
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9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1872 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Sanders conference flight	\$756.60	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/27/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1873 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Sanders conference flight	\$657.80	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1874 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Transportation for Prop 10 advocates and mobilizers	\$896.10	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1875 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Mistaken charge to be resolved	\$496.60	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1876 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Meal for mobilizers and prop 10 advocates	\$456.46	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1877 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Transportation for Prop 10 advocates and mobilizers	\$1,912.71	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/12/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1878 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Tape for office	\$4.70	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1879 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Transportation for Prop 10 advocates and mobilizers	\$704.52	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1880 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Monthly efax fee	\$19.95	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/20/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1881 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Transportation for celeb Dolores Huerta for Prop. 10	\$295.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1942 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Talent	\$500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1944 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Robocalls	\$65,188.68	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1945 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Pre-roll spots	\$50,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/19/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1946 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Pre-roll spots	\$25,000.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1947 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Press release distribution inv. #10001908	\$830.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1948 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Video Production - Craft	\$82.50	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1949 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Billboards	\$19,149.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/18/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1950 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Weather/Traffic Report Sponsorship	\$200,600.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1951 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Video Production - Craft	\$8.75	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1952 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Video Production - Craft	\$38.20	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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Schedule C

Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C

Statement covers period
from 09/23/2018
through 10/20/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1953 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Video Production - Props	\$24.92	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1954 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Press release distribution inv. #10000913	\$830.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1955 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Commercial	\$3,745.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/15/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1956 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Billboards	\$3,500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

Schedule C Summary

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(Include all Schedule C subtotals.).....
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Schedule C

Nonmonetary Contributions Received

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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I.D. Number 1399958	

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NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/5/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1957 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Video Production - Craft	\$284.70	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/5/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1958 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Concert Signage- Step and Repeat	\$567.65	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1959 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Video Production - Props	\$20.89	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/4/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1960 Committee ID: 1281664	<div><div></div><div>IND</div><div>COM</div><div><div></div>OTH</div><div>PTY</div><div>SCC</div></div>		Video Production - Props	\$27.06	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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Nonmonetary Contributions Received

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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10/2/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1961 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Press release distribution inv. #4986346	\$715.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1962 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Press release distribution inv. #4986020	\$580.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1963 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Press release distribution inv. #4985962	\$580.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1964 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Billboards	\$4,118.22	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

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SUBTOTAL

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Schedule C

Nonmonetary Contributions Received

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SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460 Page 94 of 181
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
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10/1/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1965 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Billboards	\$19,148.79	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/26/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1966 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Press release distribution inv. #4984425	\$600.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/26/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1967 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Video Editing	\$5,150.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/24/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1968 Committee ID: 1281664	<div><div></div><div>IND</div><div></div><div>COM</div><div><div></div></div><div>OTH</div><div></div><div>PTY</div><div></div><div>SCC</div></div>		Video Voiceover	\$250.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes

IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period

from 09/23/2018

through 10/20/2018

CALIFORNIA
FORM **460**

Page 95 of 181

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. Number
1399958

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/24/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1969 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Hair & Make UP	\$500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/24/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1970 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Actor & Voiceover	\$550.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/24/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1971 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Actor	\$500.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
9/24/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1972 Committee ID: 1281664	<div><div></div><div>IND</div><div><div></div></div><div>COM</div><div><div></div></div><div>OTH</div><div><div></div></div><div>PTY</div><div><div></div></div><div>SCC</div></div>		Video voiceover	\$300.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.

(Include all Schedule C subtotals.).....

2. Amount received this period - unitemized nonmonetary contributions of less than \$100

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes

IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
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PTY - Political Party
SCC - Small Contributor Committee

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
Page 96 of 181	I.D. Number 1399958

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/16/2018	AIDS Healthcare Foundation Los Angeles, CA 90028 Memo Reference: NON1997 Committee ID: 1281664	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Press Rel. Distribution Inv. #10000913	\$830.00	\$23,475,618.56	2018S: \$368,997.05 2018G: \$23,281,621.51
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$973,474.84

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

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Schedule D

Summary of Expenditures

Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460	
from	09/23/2018		
through	10/20/2018	Page 97 of 181	
		I.D. NUMBER 1399958	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)
- Unitemized contributions and independent expenditures made this period of under \$100
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL**

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 09/23/2018 through 10/20/2018		CALIFORNIA FORM 460 Page 98 of 181
I.D. NUMBER 1399958		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL			\$953,279.76
Hso Hkam Venice, CA 90291	WEB			\$1,500.00
Arielle Sallai Los Angeles, CA 90026	CNS			\$2,100.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$8,045,780.19
2. Unitemized payments made this period of under \$100.	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$8,045,780.19

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 99 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

SEE INSTRUCTIONS ON REVERSE

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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rising Tide Washington, DC 20005	WEB			\$2,500.00
Blue State Digital Chicago, IL 60693-0621			BSD Monthly Tools License Fee- September 2018	\$995.00
Rising Tide Washington, DC 20005	WEB			\$10,200.00
James Ryan Albert San Bernardino, CA 92404	CNS			\$2,500.00
Andrea Slater Vallejo, CA 94590	CNS			\$2,875.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 100 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Arielle Sallai Los Angeles, CA 90026	CNS			\$700.00
Bonnie Lee Ann Ulshafer Camarillo, CA 93010	CNS			\$3,000.00
Elizabeth Marley in Wha Kim Burbank, CA 91506	CNS			\$1,600.00
Grassroots Impact, LLC San Francisco, CA 94111	CNS			\$5,000.00
SB Strategies Inc. Inglewood, CA 90301	CNS			\$5,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 101 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Susan Shannon Studio City, CA 91614	CNS			\$3,000.00
Ileana Wachtel Pacific Palisades, CA 90272	CNS			\$1,000.00
California Families Vote Green Long Beach, CA 90802	LIT			\$32,000.00
Committee ID: 1408055 Alice B. Toklas LGBT Democratic Club San Francisco, CA 94114	LIT			\$2,500.00
Committee ID: 1239530 Tracy Austin Inc. Beverly Hills, CA 90210	CNS			\$10,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 102 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
EMC Research Columbus, OH 43215	CNS			\$2,500.00
Educate Your Vote Encino, CA 91436	LIT			\$28,500.00
Committee ID: 1345655 Rose Pak Democratic Club Slate Mail Organization San Francisco, CA 94108	LIT			\$1,000.00
Committee ID: 1391291 James Ryan Albert San Bernardino, CA 92404	CNS			\$1,666.67
Sierra Club, San Francisco Bay Chapter Campaigns SMO Berkeley, CA 94702	LIT			\$3,500.00
Committee ID: 1306869				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 103 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Pivot Group, Inc. Washington, DC 20036	LIT			\$185,851.92
The Pivot Group, Inc. Washington, DC 20036	LIT			\$185,851.92
Rising Tide Washington, DC 20005	WEB			\$150,433.42
Rising Tide Washington, DC 20005	WEB			\$11,173.44
Rising Tide Washington, DC 20005	WEB			\$10,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 104 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rising Tide Washington, DC 20005		Reimbursement	\$705.39
Rising Tide Washington, DC 20005	WEB		\$5,000.00
Rising Tide Washington, DC 20005	WEB		\$2,426.40
Rising Tide Washington, DC 20005	WEB		\$3,500.00
Rising Tide Washington, DC 20005	WEB		\$10,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 09/23/2018		
through 10/20/2018		Page 105 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rising Tide Washington, DC 20005	WEB			\$12,593.55
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	WEB			\$20,000.00
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL			\$34,111.53

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
through 10/20/2018		Page 106 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL			\$2,905,910.36
Google LLC San Francisco, CA 94139	WEB			\$11,706.82
Viral Nation Inc. Vaughan, Ontario, 427	WEB			\$22,500.00
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
The Pivot Group, Inc. Washington, DC 20036	LIT			\$185,851.92

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 09/23/2018		
through 10/20/2018		Page 107 of 181
NAME OF FILER Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action		I.D. NUMBER 1399958

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
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LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
Charter Communciations Holdings, LLC; Spectrum Reach St. Louis, MO 63131-3674	WEB			\$100,050.00
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
First National Bank Omaha Omaha, NE 68103-2818			Credit card statement	\$28,473.85
Blue State Digital Chicago, IL 60693-0621			BSD Monthly Tools License Fee- August 2018	\$710.16

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SCHEDULE E (CONT.)

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from 09/23/2018		
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bonnie Lee Ann Ulshafer Camarillo, CA 93010	CNS		Reimbursement	\$142.61
Harvey Milk LGBG Democratic Club Voter Guide Oakland, CA 94618	LIT			\$5,000.00
Committee ID: 1383194 Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL			\$83,392.67
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
Rising Tide Washington, DC 20005	WEB			\$3,500.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Life of Wallo267 LLC Philadelphia, PA 19132	WEB			\$300.00
Joshua A Carrasco Pico Rivera, CA 90660	WEB			\$850.00
Central Artists Burbank, CA 91505		Production		\$550.00
Azpire Print & Mediaworks, LLC Los Angeles, CA 90034	CMP			\$3,745.83
Robert Eugene Bennett Burbank, CA 91506	TEL			\$2,579.90

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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Political Data, Inc. Norwalk, CA 90652	POL			\$20,640.10
LA Focus Newspaper Inglewood, CA 90301	PRT			\$2,500.00
San Francisco Center for Newspaper Preservation San Francisco, CA 94110	PRT			\$1,300.00
San Francisco Women's Political Committee Slate San Francisco, CA 94104	LIT			\$1,000.00
Committee ID: 1342335 Hso Hkam Venice, CA 90291	WEB			\$3,059.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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from	09/23/2018	
through 10/20/2018		Page 111 of 181
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rising Tide Washington, DC 20005	WEB			\$2,500.00
Andrea Slater Vallejo, CA 94590	CNS			\$2,875.00
Bonnie Lee Ann Ulshafer Camarillo, CA 93010	CNS			\$3,000.00
Elizabeth Marley in Wha Kim Burbank, CA 91506	CNS			\$1,600.00
Grassroots Impact, LLC San Francisco, CA 94111	CNS			\$5,000.00

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ileana Wachtel Pacific Palisades, CA 90272	CNS			\$1,000.00
James Ryan Albert San Bernardino, CA 92404	CNS			\$2,500.00
SB Strategies Inc. Inglewood, CA 90301	CNS			\$5,000.00
Susan Shannon Studio City, CA 91614	CNS			\$3,000.00
Los Angeles Blade Washington, DC 20009	PRT			\$750.00

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kevin Pakdivichit Los Angeles, CA 90038			Reimbursement	\$1,500.00
Arielle Sallai Los Angeles, CA 90026	CNS			\$700.00
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL			\$2,900,000.00
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
First Republic Bank Los Angeles, CA 90017	OFC			\$8.00
First National Bank Omaha Omaha, NE 68103-2818			Credit card statement	\$542.73
Viral Nation Inc. Vaughan, Ontario, 427	WEB			\$22,500.00
First Republic Bank Los Angeles, CA 90017	OFC		Wire transfer fee	\$35.00
First Republic Bank Los Angeles, CA 90017	OFC			\$35.00

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	09/23/2018	
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ActBlue Somerville, MA 02144-3132			September AB fees	\$604.72
EveryAction Washington, DC 20005	OFC		Merchant service fees	\$22.52

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SUBTOTAL \$8,045,780.19

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
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SCHEDULE F

Statement covers period
from 09/23/2018
through 10/20/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL	\$953,279.76	\$0.00	\$953,279.76	\$0.00
First National Bank Omaha Omaha, NE 68103-2818	Credit card statement	\$28,473.85	\$0.00	\$28,473.85	\$0.00
Rising Tide Washington, DC 20005	WEB	\$2,500.00	\$0.00	\$2,500.00	\$0.00

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SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$113,910.36
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$1,242,388.31
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** (\$1,128,477.95)
May be a negative number.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

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SCHEDULE F (CONT.)

Statement covers period
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NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

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LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Blue State Digital Chicago, IL 60693-0621	BSD Monthly Tools License Fee- September 2018	\$995.00	\$0.00	\$995.00	\$0.00
Rising Tide Washington, DC 20005	WEB	\$10,200.00	\$0.00	\$10,200.00	\$0.00
California Families Vote Green Long Beach, CA 90802	LIT	\$32,000.00	\$0.00	\$32,000.00	\$0.00
Committee ID: 1408055 EMC Research Columbus, OH 43215	CNS	\$2,500.00	\$0.00	\$2,500.00	\$0.00

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

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SCHEDULE F (CONT.)

Statement covers period
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NAME OF FILER

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Educate Your Vote Encino, CA 91436	LIT	\$28,500.00	\$0.00	\$28,500.00	\$0.00
Committee ID: 1345655					
Rising Tide Washington, DC 20005	WEB	\$10,000.00	\$0.00	\$10,000.00	\$0.00
Rising Tide Washington, DC 20005	Reimbursement	\$705.39	\$0.00	\$705.39	\$0.00
Rising Tide Washington, DC 20005	WEB	\$5,000.00	\$0.00	\$5,000.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 09/23/2018
through 10/20/2018

**CALIFORNIA
FORM 460**

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NAME OF FILER
Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|-------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Rising Tide Washington, DC 20005	WEB	\$2,426.40	\$0.00	\$2,426.40	\$0.00
Rising Tide Washington, DC 20005	WEB	\$3,500.00	\$0.00	\$3,500.00	\$0.00
Rising Tide Washington, DC 20005	WEB	\$10,000.00	\$0.00	\$10,000.00	\$0.00
Rising Tide Washington, DC 20005	WEB	\$12,593.55	\$0.00	\$12,593.55	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 09/23/2018
through 10/20/2018

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NAME OF FILER
Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|-------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	WEB	\$20,000.00	\$0.00	\$20,000.00	\$0.00
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL	\$34,111.53	\$0.00	\$34,111.53	\$0.00
Blue State Digital Chicago, IL 60693-0621	BSD Monthly Tools License Fee- August 2018	\$710.16	\$0.00	\$710.16	\$0.00
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL	\$83,392.67	\$0.00	\$83,392.67	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 09/23/2018
through 10/20/2018

CALIFORNIA FORM 460

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NAME OF FILER
Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Life of Wallo267 LLC Philadelphia, PA 19132	WEB	\$0.00	\$300.00	\$0.00	\$300.00
A/B Strategy Consulting Inc. Brooklyn, NY 11217	POL	\$0.00	\$2,700.00	\$0.00	\$2,700.00
Joe Trippi & Associates, Inc. St. Michaels, MD 21663	TEL	\$0.00	\$110,910.36	\$0.00	\$110,910.36
Hso Hkam Venice, CA 90291	WEB	\$1,500.00	\$0.00	\$1,500.00	\$0.00
SUBTOTALS		\$1,242,388.31	\$113,910.36	\$1,242,388.31	\$113,910.36

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

NAME OF AGENT OR INDEPENDENT CONTRACTOR

First National Bank Omaha

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FedEx Los Angeles, CA 90028				\$13.14
FedEx Los Angeles, CA 90028				\$79.59
The Harman Press North Hollywood, CA 91605	OFC			\$1,824.27
Pacific Print Resources Emeryville, CA 94608	OFC			\$491.63

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$2408.63

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

NAME OF AGENT OR INDEPENDENT CONTRACTOR

First National Bank Omaha

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Southwest Airlines Dallas, TX 75235	OFC			\$311.96
Southwest Airlines Dallas, TX 75235	OFC			\$331.96
Southwest Airlines Dallas, TX 75235	OFC			\$279.96
The Harman Press North Hollywood, CA 91605	OFC			\$865.05

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1788.93

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
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to whole dollars.

SCHEDULE G

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NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

NAME OF AGENT OR INDEPENDENT CONTRACTOR

First National Bank Omaha

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Good Hotel San Francisco, CA 94103	OFC			\$508.06
Good Hotel San Francisco, CA 94103	OFC			\$514.06
Good Hotel San Francisco, CA 94103	OFC			\$508.06
FedEx Los Angeles, CA 90028	OFC			\$101.27

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1631.45

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
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SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

NAME OF AGENT OR INDEPENDENT CONTRACTOR

First National Bank Omaha

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FedEx Los Angeles, CA 90028	OFC			\$48.45
Southwest Airlines Dallas, TX 75235	OFC			\$449.96

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$498.41

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Kevin Pakdivichit

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Facebook Menlo Park, CA 94025	WEB			\$750.00
Facebook Menlo Park, CA 94025	WEB			\$750.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1500.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 09/23/2018
through 10/20/2018

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Andrea Slater

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FedEx Los Angeles, CA 90028				\$70.90

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$70.90

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from 09/23/2018 through 10/20/2018	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER
1399958

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS						

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

** If Required

(May be a negative number)

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period
from 09/23/2018
through 10/20/2018

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on 10 - a Coalition of Teachers, Nurses, Seniors and Renters for Affordable Housing, Sponsored by AIDS Healthcare Foundation and ACCE Action

I.D. NUMBER

1399958

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$.00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$.00
- Unitemized increases to cash under \$100 this period..... \$.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$.00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: NON1055
in-kind contribution

Memo Reference: NON1066
in-kind contribution

Memo Reference: NON1067
in-kind contribution

Memo Reference: NON1068
in-kind contribution

Memo Reference: NON1112
in-kind contribution

Memo Reference: NON1127
in-kind contribution

Memo Reference: NON1128
in-kind contribution

Memo Reference: NON1129
in-kind contribution

Memo Reference: NON1133
in-kind contribution

Memo Reference: NON1134
in-kind contribution

Memo Reference: NON1135
in-kind contribution

Memo Reference: NON1278
in-kind contribution

Memo Reference: NON1279
in-kind contribution

Memo Reference: NON1280
in-kind contribution

Memo Reference: NON1144
in-kind contribution

Memo Reference: NON1145
in-kind contribution

Memo Reference: NON1158
in-kind contribution

Memo Reference: NON1165
in-kind contribution

Memo Reference: NON1216
in-kind contribution

Memo Reference: NON1360
in-kind contribution

Memo Reference: NON1218
in-kind contribution

Memo Reference: NON1226
in-kind contribution

Memo Reference: NON1244
in-kind contribution

Memo Reference: NON1245
in-kind contribution

Memo Reference: NON1246
in-kind contribution

Memo Reference: NON1247
in-kind contribution

Memo Reference: NON1248
in-kind contribution

Memo Reference: NON1249
in-kind contribution

Memo Reference: NON1250
in-kind contribution

Memo Reference: NON1251
in-kind contribution

Memo Reference: NON1289
in-kind contribution

Memo Reference: NON1290
in-kind contribution

Memo Reference: NON1324
in-kind contribution

Memo Reference: NON1325
in-kind contribution

Memo Reference: NON1326
in-kind contribution

Memo Reference: NON1396
in-kind contribution

Memo Reference: NON1397
in-kind contribution

Memo Reference: NON1398
in-kind contribution

Memo Reference: NON1405
in-kind contribution

Memo Reference: NON1406
in-kind contribution

Memo Reference: NON1407
in-kind contribution

Memo Reference: NON1413
in-kind contribution

Memo Reference: NON1422
in-kind contribution

Memo Reference: NON1423
in-kind contribution

Memo Reference: NON1424
in-kind contribution

Memo Reference: NON1436
in-kind contribution

Memo Reference: NON1426
in-kind contribution

Memo Reference: NON1427
in-kind contribution

Memo Reference: NON1437
in-kind contribution

Memo Reference: NON1438
in-kind contribution

Memo Reference: NON1447
in-kind contribution

Memo Reference: NON1448
in-kind contribution

Memo Reference: NON1471
in-kind contribution

Memo Reference: NON1472
in-kind contribution

Memo Reference: NON1474
in-kind contribution

Memo Reference: NON1475
in-kind contribution

Memo Reference: NON1499
in-kind contribution

Memo Reference: NON1500
in-kind contribution

Memo Reference: NON1501
in-kind contribution

Memo Reference: NON1529
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